



As wound care changes...



Medline leads the way.

Advanced Wound Care Product Catalog

As wound care changes, Medline leads the way.

Better products for improved outcomes | Cost-effective choices | Broad clinical and product support

Building a tradition of innovation

Medline is not the same wound care company as it was ten, five or even three years ago.

Medline has not only made several enhancements to our line of wound care products, we've added many educational and training improvements as well. More products, more specialists and more educational programs have transformed Medline into a leader in wound care.

So how does Medline's growth translate into better care for your patients? To start with, our product improvements have been a direct result of listening to your feedback.

Listening to you.

For instance, after you told us that other hydrocolloids didn't have the fluid handling you needed, we developed **Exuderm® Ultra**, a hydrocolloid that's thinner than traditional hydrocolloids, but actually handles more fluid (see page 12).

When you told us that other calcium alginates broke apart in the wound, we developed **Maxorb®** which features easy one-piece removal and does not wick laterally which helps protect the periwound skin from maceration (see page 16).

Introducing new technologies.

When we saw there weren't dressings available to address some of your needs, we introduced new product categories.

We introduced **TenderWet® Active** to provide an option for debridement that's both clinically effective and cost-effective. By providing necrotic wounds with a rinsing effect for up to 24 hours, TenderWet Active eliminates the need for "wet-to-dry." (And outperforms more costly methods. See page 10.)

Medline was the first to introduce the wound care community to the antimicrobial benefits of controlled-release silver with **Arglaes® Film** (see page 6).

And we continued to improve and expand silver delivery to all type of wounds with **Arglaes Powder** and **SilvaSorb™** (see page 4).

Helping lower the costs of wound care

Better products and improved outcomes don't have to come at a higher price. In fact, beyond just the price of the product, Medline can help lower your costs in several ways.

First, we can reduce nursing time. Many of our products contain features like improved fluid handling that allow



Need more information?

- Call our Educare hotline at 1-888-701-SKIN
- Visit our website at www.medline.com/woundcare

for longer wear times and fewer dressing changes. Second, with the combination of products and support from Medline, we can help you improve your outcomes. The faster your patients are healed, the lower the cost.

And third, dressings like TenderWet Active, Arglaes and SilvaSorb help prevent more costly problems that can be associated with necrotic and infected wounds.

More support than ever before

At Medline, we've long recognized that while innovation is important, education and support are key. That's why in recent years, we have dramatically increased the resources available to help you provide the best care possible.

Over 50 wound care product specialists.

Receiving help from a Medline wound care product specialist has never been easier. We now have over 50 specialists (in addition to our 550-person sales force which represents the rest of our product line) devoted solely to supplying you with the wound care products, service and educational support necessary.

Our team of advanced wound care product specialists is highly trained and available to deliver on-site, face-to-face training for your staff.

Educare® hotline supervised by ET/WOC Nurses

An important number to remember is **1-888-701-SKIN**. That number provides you access to our Educare hotline — supervised by board-certified ET/WOC nurses and supported by a network of advanced wound care product specialists. An ET/WOC nurse is available to serve as an information source for questions and concerns on product usage such as application and appropriateness of the dressing for the wound condition.

Product support at www.medline.com/woundcare

Medline's website is another way to get up-to-the-minute product information. You'll find all the latest brochures, clinicals as well as application videos online at www.medline.com/woundcare. You'll also find an interactive product selector that can help direct you to the best product choices depending on wound conditions.

Educare seminars

Throughout the year, Medline offers Educare seminars in cities across the country. This in-depth program provides training for the staff member in the areas of wound and skin care management.

All Educare programs are approved for continuing education hours and are taught by a board-certified ET/WOC nurse.



Medline also has a number of options available that let you tailor a wound care educational program to the needs of your patients, your facility and your caregivers.

Educam digital wound tracking

What if your care plan could be administered from a single place where experts could gather to discuss, assess and track all the wounds in your facility? Or in multiple facilities? That's exactly what you can do with Medline's Educam program.

With Educam, you photograph wounds and transmit the photo digitally to a secure, HIPAA compliant website customized for your facility. Then, by using the Internet, specialists, caregivers or doctors can log on to the website to view the records. Photographs, patient information, treatment history can all be reviewed and recommendations can be made remotely. The key benefits of this program are:

- Consistency in care plans
- Wounds can be tracked and outcomes measured
- Provides immediate access to the clinical expert of your choice for wound consultation
- Significant time-savings by performing assessments from a central location, or remotely

If you have questions about anything in this brochure, please contact your Medline representative or call us at 1-800-MEDLINE.

SilvaSorb® Antimicrobial Silver Dressing

Controlled-release, ionic silver for targeted antimicrobial protection



SilvaSorb is a polyacrylate sheet that combines controlled-release antimicrobial silver with advanced fluid management. This remarkable dressing can absorb more than five times its weight in exudate while helping provide a barrier against infection for up to seven days.

SilvaSorb is available in five formats:

- SilvaSorb Sheets for flat wounds with no to moderate exudate;
- SilvaSorb Perforated Sheets for flat wounds with moderate to heavy exudate;
- SilvaSorb Cavity for cavity wounds with all exudate levels
- SilvaSorb Hydrogel for dry wounds.
- SilvaSorb Site for I.V. catheters, venal venous lines, arterial catheters and other similar uses

Reduces bioburden

Effective against a broad spectrum of bacteria and fungi.

Constant antimicrobial protection

Controlled-release antimicrobial silver.

Gentle for patient

Non-adherent and no residue left in wounds.

Simple wound monitoring

Transparent. Will not stain wound or surrounding skin.

SilvaSorb Sheets & Cavity

Advanced fluid management

Absorbs at least five times its weight in exudate or donates moisture as needed.

Extended wear time

Effective for up to seven days. Reduces change frequency and staff time.

Optimal moisture levels

Balanced moisture management helps create an ideal healing environment. Will not macerate or dry wounds.

Easy to use

No need to pre-wet or re-wet. Can be cut to size.

SilvaSorb Gel

Donates Moisture

Hydrogel helps hydrate dry wounds and maintain an optimally moist wound healing environment.

Easy to use

Easy to spread and won't melt into the wound.

SilvaSorb Ordering Information

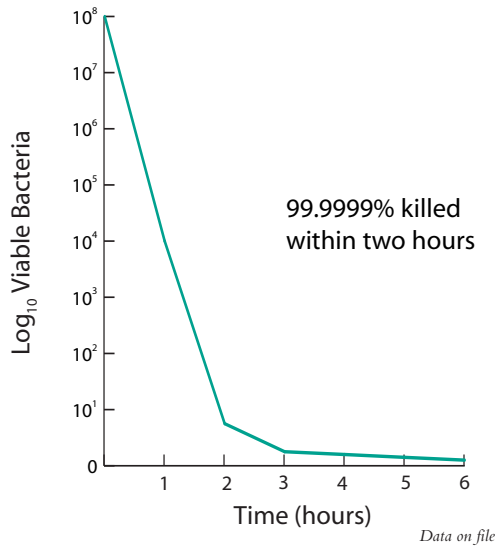


<u>Item No.</u>	<u>Description</u>	<u>HCPCS</u>	<u>Packaging</u>
MSC9322	Sheet, 2" x 2"	A6242	5/bx, 5 bx/cs
MSC9344	Sheet, 4¼" x 4¼"	A6243	5/bx, 5 bx/cs
MSC9348	Sheet, 4" x 8"	A6243	5/bx, 5 bx/cs
MSC9340	Perf. Sheet, 4¼" x 4¼"	A6243	5/bx, 5 bx/cs
MSC93410	Perf. Sheet, 4" x 10"	A6243	5/bx, 5 bx/cs
MSC9300	Cavity, 6 gram	none	10/bx, 4 bx/cs
MSC93025	Gel, .25 oz tube	pending	25/bx
MSC9301	Gel, 1.5 oz tube	A6248	12/cs
MSC9308	Gel, 8 oz tube	A6248	6/cs
MSC9316	Gel, 16 oz net. wt. jar	pending	8/cs
MSC9310	Site, 1" circular pad w/slit	pending	10/bx, 6 bx/cs

Recommended Wound Conditions

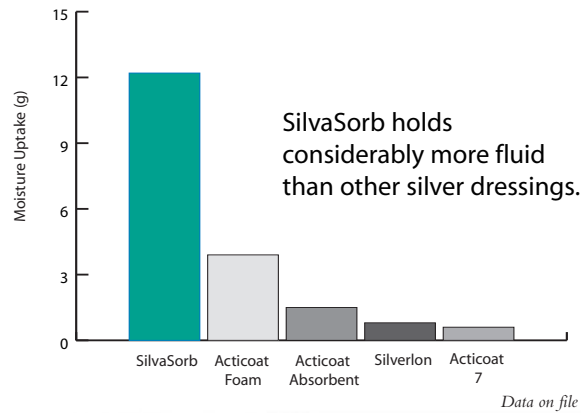
- Shallow
- No/Minimal Drainage
- Primary Dressing
- Deep (Cavity)
- Moderate/Heavy Drainage
- Secondary Dressing

E.coli Survival Curve with SilvaSorb

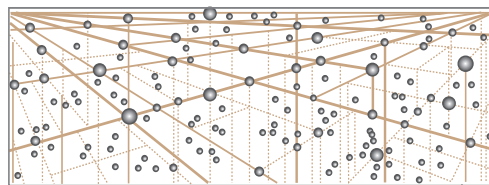


SilvaSorb Absorbency Comparison

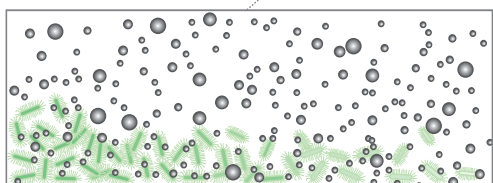
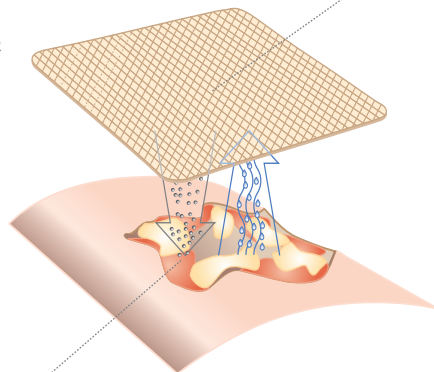
Absorption using a 5 cm x 5 cm sample of dressing



The dressing can absorb more than five times its weight in exudate.



Ionic silver is suspended in SilvaSorb's MicroLattice until moisture from the wound triggers its release.



The controlled-release ionic silver provides a barrier against infection for up to seven days.



Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds
- Leg ulcers
- Diabetic foot ulcers
- Grafted wounds and donor sites
- Skin tears
- Surgical wounds
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Individuals with a known sensitivity to silver.

Change Frequency

- May be left in place for up to 7 days. Amorphous gel up to 3 days.
- Dressing change frequency will depend upon the amount of exudate.
- Change the dressing if the exudate begins to pool within the wound or with significant strike-through on the secondary dressing.

Recommended Secondary Dressings

- Stratasorb Composite Dressing
- Bordered Gauze

Arglaes® Antimicrobial Silver Barrier

Controlled-release, non-cytotoxic antimicrobial silver in a variety of formats.



Arglaes began the antimicrobial silver revolution as the first product to provide controlled-release, ionic silver for up to seven days.

Arglaes technology utilizes ionic silver to create an environment hostile to bacteria and fungi, but completely non-cytotoxic. The sustained-activity ionic silver maintains full efficacy for up to seven days. The Arglaes technology is available as a transparent film dressing, with and without an alginate pad. The film has a high moisture vapor transmission rate. Arglaes Powder is well suited for difficult-to-dress wounds as its alginate base forms a soft, conforming gel when it contacts wound exudate.

Reduces bioburden

Effective against a broad spectrum of bacteria and fungi.

Constant antimicrobial protection

Controlled-release antimicrobial silver.

Non-Cytotoxic

Controlled release silver will kill bacteria and fungi, but will not harm healthy tissue.

Extended wear time

Effective for up to seven days.

Arglaes Film

Ideal for post-op and line sites

Arglaes Film is perfect for managing bioburden on line sites, post-operative incisions and donor sites.

Arglaes Island

Manages fluid and bioburden

Arglaes Island features a calcium alginate pad for fluid management in addition to controlled-release silver.

Arglaes Powder

Ideal for difficult to dress wounds

Arglaes Powder can offer bioburden reduction and fluid management to virtually any size, shape or depth of wound. It is easily combined with other dressings to create a system for bioburden control and optimal moist wound healing.

Arglaes Ordering Information

Item No.	Description	Packaging
MSC9023	Film, 2 $\frac{3}{8}$ " x 3 $\frac{1}{8}$ "	10/bx, 100/cs
MSC9045	Film, 4" x 4 $\frac{3}{4}$ "	10/bx, 100/cs
MSC9069	Film, 4 $\frac{3}{4}$ " x 10"	10/bx, 50/cs
MSC9314	Film, 3" x 14", Post-Op Style	10/bx, 50/cs
MSC9123	Alginate Island, 2 $\frac{3}{8}$ " x 3 $\frac{1}{8}$ ", 1" x 2" pad	10/bx, 100/cs
MSC9145	Alginate Island, 4" x 4 $\frac{3}{4}$ ", 2" x 2" pad	10/bx, 100/cs
MSC9169	Alginate Island, 4 $\frac{3}{4}$ " x 10", 2 $\frac{3}{4}$ " x 8" pad	10/bx, 50/cs
MSC9205	Powder, 5 gm bottle	5/bx, 20/cs
MSC9210	Powder, 10 gm bottle	5/bx, 20/cs
MSC9210SP	Powder, 10 gm bottle in Sterile Pouch	5/bx, 20/cs

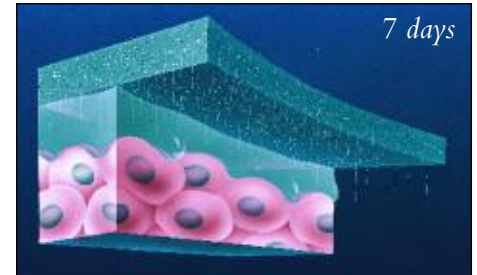
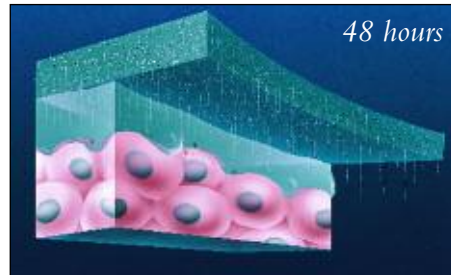
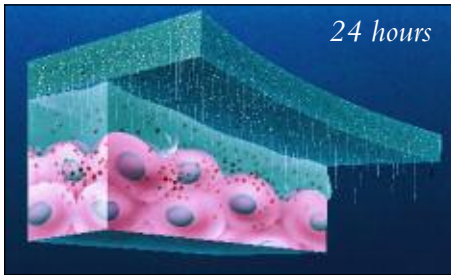
latexfree
PRODUCT



Recommended Wound Conditions

- Shallow
- No/Minimal Drainage
- Primary Dressing
- Deep (Powder Only)
- Moderate/Heavy Drainage (Powder Only)
- Secondary Dressing

Arglaes provides an antimicrobial barrier for up to seven days. Silver ions are released at a constant rate, providing a barrier that inhibits the growth of new bacteria and helps prevent the migration of already existing bacteria.



Arglaes Zone of Inhibition Study (in mm)

Organism	24 hours			48 hours			7 days		
	Arglaes	Iodine (Povidone iodine)	Fertility Control	Arglaes	Iodine (Povidone iodine)	Fertility Control	Arglaes	Iodine (Povidone iodine)	Fertility Control
<i>Proteus vulgaris</i>	11.3	12.1	+++	10.2	5.2	+++	9.3	2.9	+++
<i>Acinetobacter baumannii</i>	14.8	6.8	+++	10.2	4.0	+++	10.5	3.8	+++
<i>Enterococci faecium</i>	9.2	0.0	+++	8.8	0.0	+++	9.5	1.2	+++
<i>Serratia marcescens</i>	9.0	4.4	+++	7.5	0.0	+++	7.3	0.0	+++
<i>Candida albicans</i>	13.5	15.1	+++	13.1	8.2	+++	15.6	3.8	+++
<i>Pseudomonas aeruginosa</i>	9.7	1.4	+++	8.9	0.0	+++	8.0	0.0	+++
<i>Proteus mirabilis</i>	8.8	6.9	+++	8.1	5.7	+++	9.9	5.9	+++
<i>Staphylococcus aureus</i>	14.7	0.0	+++	13.5	0.0	+++	13.4	0.0	+++
<i>Escherichia coli</i>	7.5	0.7	+++	6.9	0.6	+++	6.7	0.0	+++
<i>Enterobacter cloacae</i>	5.4	8.0	+++	5.1	0.0	+++	4.8	0.0	+++
<i>Staphylococcus aureus</i> (MRSA, NCTC 12493*)	20.0	10.6	+++	20.5	0.0	+++	20.3	0.0	+++
<i>Klebsiella Edwardsii</i> var Edwardsii	11.3	12.1	+++	10.2	5.2	+++	9.3	2.9	+++
<i>Staphylococcus aureus</i> (MRSA, NCTC 12232*)	13.9	2.6	+++	12.8	1.7	+++	12.5	1.5	+++
<i>Staphylococcus epidermidis</i>	16.0	0.0	+++	15.7	0.0	+++	22.1	0.0	+++

*National Collection Type Culture Catalog. Independent study performed by Wickham Laboratories Limited, Hampshire, England

Illustrations shown here are representations of sustained-activity antimicrobial barrier effect.

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds
- Leg ulcers
- Diabetic ulcers
- Central lines, CVPs and PICC lines (Arglaes Film only)
- Surgical wounds
- Grafted wounds (Arglaes Powder only)
- Donor sites
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Third degree burns
- Individuals with a known sensitivity to silver
- As a surgical implant
- On dry wounds or wounds that are completely covered with black, necrotic tissue (Arglaes Powder)
- Do not use topical antibiotics in conjunction with Arglaes Powder.

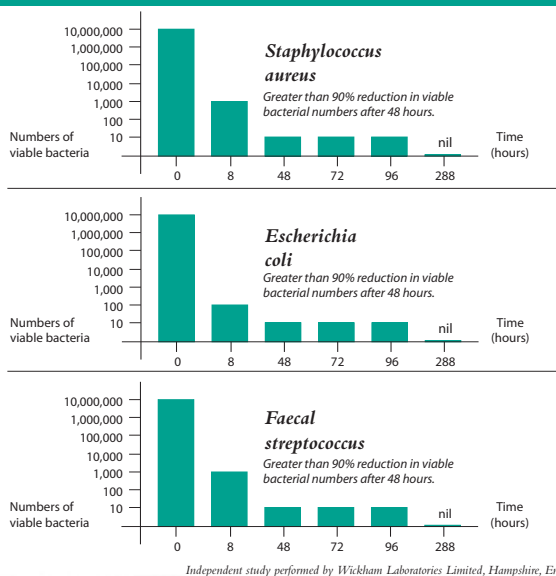
Change Frequency

- Arglaes Film may be left in place for up to 7 days.
- Arglaes Island and Arglaes Powder may be left in place for up to 5 days.
- Dressing change frequency will depend upon the amount of exudate.

Recommended Secondary Dressings

- Stratasorb Composite Dressing
- Arglaes can also be used to convert any other dressing into an antimicrobial dressing

Sustained-Release Activity of Arglaes



Maxorb® Extra Ag Silver Alginate

Controlled-release, non-cytotoxic ionic silver with exceptional fluid handling.



Maxorb Extra Ag is a highly absorbent, non woven pad composed of a high G (guluronic acid) calcium alginate, carboxymethylcellulose (CMC) and ionic silver.

Exposure to wound exudate dissolves the silver and stimulates the release of silver ions. As more fluid is absorbed over time, more silver ions are released, creating a controlled-release antimicrobial effect.

The silver ions protect from a broad spectrum of microorganisms, including MRSA and VRE. Plus Maxorb Extra Ag releases silver in extremely small amounts that do not damage healthy tissue.

Maxorb Extra Ag is biocompatible, non-irritating, non-sensitizing and will not harm new granulation tissue.

Maxorb Extra Ag Ordering Information		
Item No.	Description	Packaging
MSC9422	Sheet 2" x 2"	10/bx, 10 bx/cs
MSC9444	Sheet 4" x 4"	10/bx, 5 bx/cs
MSC9412	Rope 12" x 1"	5/bx, 4 bx/cs

Sustained antimicrobial protection

Releases silver ions, in a controlled manner, for up to four days

Highly absorbent

Maxorb Extra Ag absorbs more than other alginate or absorbent silver dressings.

Fluid will not wick laterally

Wound exudate mixes with Maxorb Extra Ag to form a gel that will not wick out, reducing the potential for damage to periwound skin.

Superior gelling and fluid handling

The CMC fiber in Maxorb Extra Ag improves the vertical wicking and fluid handling as well as the wet strength.

Reduces odor

Odor in wounds is primarily caused by bacteria, and so by providing an antibacterial barrier to combat bacteria absorbed in the wound exudate, odor is reduced.

Comparison of Medline silver dressings

Exudate level	Comparison of Medline silver dressings		
	Flat	Cavity (wound style)	Difficult to Dress
High	Maxorb Extra Ag Sheet	Maxorb Extra Ag Rope or Arglaes Powder	Maxorb Extra Ag Rope or Arglaes Powder
Moderate	SilvaSorb Sheet w/ Perfs or Maxorb Extra Ag Sheet	SilvaSorb Cavity or Maxorb Extra Ag Rope	Maxorb Extra Ag Rope or Arglaes Powder
Low	SilvaSorb Sheets or Arglaes Film or Island	SilvaSorb Cavity or SilvaSorb Gel	SilvaSorb Gel

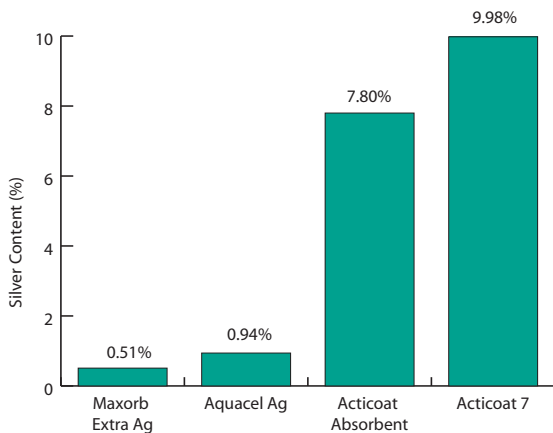
- Shallow No/Minimal Drainage Primary Dressing
- Deep Moderate/Heavy Drainage Secondary Dressing

Zone of Inhibition (diameter in mm)

Culture Strain	Maxorb Extra Ag	Acticoat 7	Aquacel Ag	Control
<i>Staphylococcus epidermidis</i> (MRSE)	5.5	6.7	7.4	0
<i>Staphylococcus aureus</i> (MRSA)	4.3	4.6	5.1	0
<i>Enterococcus faecalis</i> (VRE)	2.1	2	1.8	0
<i>Streptococcus pyogenes</i> (19615)	3	3.2	4.5	0
<i>Streptococcus epidermidis</i> (12228)	5	4.7	5.2	0
<i>Escherichia coli</i> (8739)	2.3	2.2	2.3	0
<i>Candida albicans</i> (10231)	7.5	7.1	8.5	0
<i>Staphylococcus aureus</i> (6538)	1.2	0.9	1.6	0
<i>Pseudomonas aeruginosa</i> (9027)	1.6	1.5	2.2	0

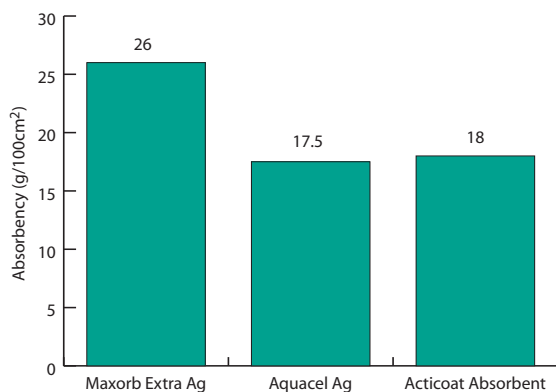
Independent study performed by Wickham Laboratories Limited

Comparison of silver content in dressings



Independent study performed by Wickham Laboratories Limited

Absorbency comparison of silver dressings



Independent study performed by Wickham Laboratories Limited



Indications

- Moderate to heavily exuding partial to full thickness wounds
- Post-operative wounds
- Trauma wounds
- Leg ulcers
- Pressure ulcers
- Diabetic ulcers
- Graft and donor sites

Contraindications

- Third-degree burns
- Dry or lightly exuding wounds
- Individuals with a known sensitivity to alginates or silver
- To control heavy bleeding
- Surgical implantation

Change Frequency

- Dressing change frequency will depend on wound condition and the level of exudate. Initially it may be necessary to change the dressing every 24 hours.
- Maxorb Extra Ag may be left in place for up to four days.

Recommended Secondary Dressings

- Stratasorb Composite Dressing

TenderWet® Active Polyacrylate Gel

Rinses and debrides chronic or necrotic wounds for up to 24 hours.



We've improved TenderWet and changed the name...

Recently we introduced an improved version of TenderWet, called TenderWet Active. TenderWet Active is pre-saturated with Ringer's solution making it easier to apply. Also, TenderWet Active retains more fluid, even when used under compression.

TenderWet Active's absorbent polyacrylate core is able to absorb and irrigate at the same time. This is because TenderWet Active has an affinity for large molecule proteins that are found in dead tissue and bacteria. As the proteins move into the core, Ringer's solution is released, creating a "rinsing effect." As a result, TenderWet Active supports autolytic and polyacrylate debridement, gently removing necrotic tissue from the wound bed.

Helps debride necrotic wounds

Creates a rinsing effect as large molecule proteins found in dead tissue and bacteria are attracted to TenderWet Active's core.

Reduces pathogens

Absorbs and retains pathogens within the TenderWet Active pad.

Uses physiologically-compatible solution

The Ringer's solution in TenderWet Active contributes electrolytes such as sodium, potassium and calcium to the wound bed.

More effective than wet gauze therapy

TenderWet Active can be left in place for up to 24 hours without drying out, while offering a barrier against microorganisms.

Helps create an ideal healing environment

By debriding necrotic tissue, absorbing and retaining pathogens, and keeping the wound moist, TenderWet Active helps create an ideal healing environment.

High fluid retention

Even under compression, TenderWet Active retains large amounts of fluid.

Easy application and removal

TenderWet Active will not stick to the wound bed allowing for virtually pain-free removal. And now our pre-saturated version is even easier to apply.

Available in two styles

TenderWet Active has a strike-through barrier to help provide a protective layer. The cavity style does not have this backing, allowing for two-sided action when packing wounds.

TenderWet Active Ordering Information



TenderWet Active

Item No.	Dressings Per Box	HCPCS	Pkg.
MSC8301	7-1.6" Round Dressings	A6242	6 bx/cs
MSC8302	7-2.1" Round Dressings	A6242	6 bx/cs
MSC8303	7-3" x 3" Square Dressings	A6242	6 bx/cs
MSC8305	7-4" x 5" Rectangle Dressings	A6243	6 bx/cs

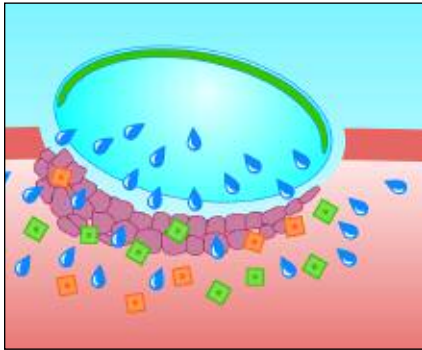
TenderWet Active Cavity

Item No.	Dressings Per Box	HCPCS	Pkg.
MSC8401	7-1.6" Round Dressings	A6242	6 bx/cs
MSC8402	7-2.1" Round Dressings	A6242	6 bx/cs
MSC8403	7-3" x 3" Square Dressings	A6242	6 bx/cs
MSC8405	7-4" x 5" Rectangle Dressings	A6243	6 bx/cs
MSC8438	7-3" x 8" Rectangle Dressings	A6243	6 bx/cs

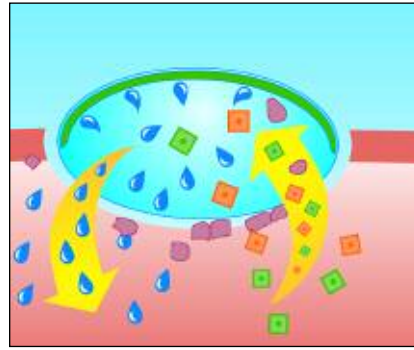
Recommended Wound Conditions

- Shallow
- No/Minimal Drainage
- Primary Dressing
- Deep (Cavity)
- Moderate/Heavy Drainage
- Secondary Dressing

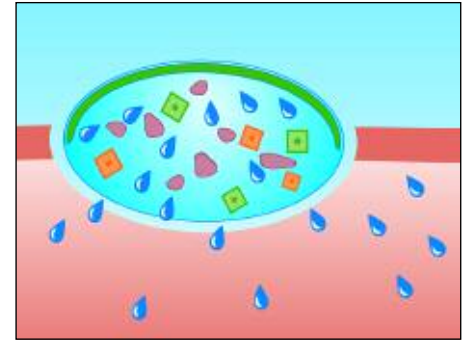
TenderWet Active's 24-Hour Rinsing Effect



TenderWet Active is pre-saturated with Ringer's solution, helping create an optimally moist wound environment.

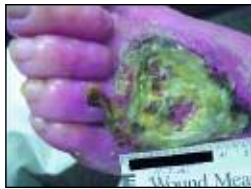


The superabsorbent polyacrylate attracts debris, necrotic tissue and microorganisms (pathogens) and exchanges them for Ringer's solution.



The 24-hour rinsing effect cleanses and prepares the wound bed, promoting active wound healing.

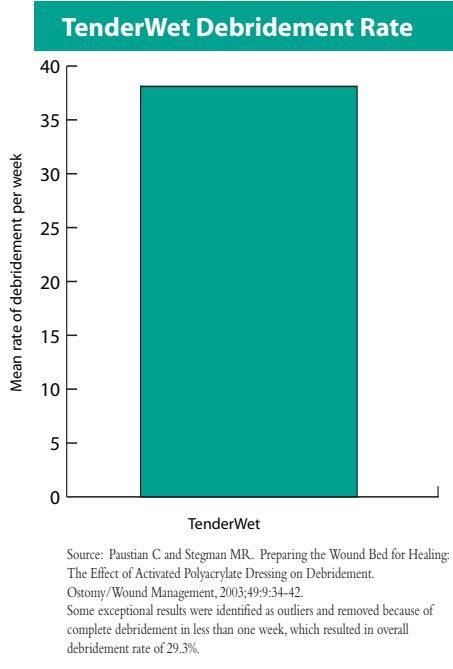
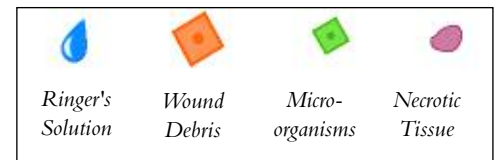
TenderWet Active Debrides Necrotic Wounds



Day 1
89 year-old female with severe arterial insufficiency and deep vein thrombosis. Necrotic wound on dorsal surface of left foot.



Day 16
Wound base has bright red base, except for deposit of fibrin on distal-Medial wound edge. Notice the healing of wound extending to 4th toe.



Indications

- Pressure ulcers (Stages II-IV)
- Partial and full thickness wounds
- Leg ulcers
- Diabetic ulcers
- Surgical wounds
- Lacerations and abrasions
- Skin tears
- Dry, light and moderately exudating wounds
- 1st and 2nd degree burns

Contraindications

- None

Change Frequency

- Every 24 hours

Recommended Secondary Dressings

- Medfix Tape
- Bordered Gauze

Exuderm® Hydrocolloids

A highly engineered family of hydrocolloids designed for all stages of wounds.



Exuderm Ordering Information



<u>Item No.</u>	<u>Description</u>	<u>HCPCS</u>	<u>Packaging</u>
Exuderm Satin			
MSC5422	2" x 2"	A6234	20/bx
MSC5444	4" x 4"	A6234	10/bx
MSC5466	6" x 6"	A6235	5/bx
MSC5488	8" x 8"	A6236	5/bx
Exuderm RCD			
MSC5200	4" x 4"	A6234	5/bx
MSC5225	6" x 6"	A6235	5/bx
MSC5250	8" x 8"	A6236	5/bx
Exuderm LP			
MSC5100	4" x 4"	A6234	10/bx
MSC5125	6" x 6"	A6235	5/bx
Exuderm Ultra			
MSC5300	4" x 4"	A6234	10/bx
Exuderm Sacrum			
MSC5370	3.6" x 4"	A6234	5/bx
MSC5375	6" x 6.5"	A6235	5/bx

Exuderm Sacrum

Anatomically shaped

Exuderm Sacrum features a “butterfly” design that is anatomically designed to conform to the natural shape of the body, including a hinged center to provide a flush fit.

Longer wear time

Exuderm Sacrum has a low residue formula and a tapered edge, facilitating longer wear time. Now with satin backing too!

Low residue formula

Allows Exuderm Sacrum to manage and absorb exudate while maintaining its integrity for longer wear.

Protective, occlusive barrier

Facilitates autolytic debridement, granulation and epithelialization.

Exuderm Satin

Longer wear time

Exuderm Satin has a low profile and a tapered edge, facilitating longer wear time.

Low residue formula

Allows Exuderm Satin to manage and absorb exudate while maintaining its integrity for longer wear.

Protective, occlusive barrier

Facilitates autolytic debridement, granulation and epithelialization.

Satin finish backing

Smooth, practically friction-free backing reduces chance of roll-up.

Exuderm Ultra

Intelligent film backing

Exuderm Ultra features an intelligent film backing that adjusts the rate of moisture vapor transfer depending on exudate level.

Longer wear time

Exuderm Ultra has a low residue formula and a low profile, facilitating longer wear time.

Protective, occlusive barrier

Facilitates autolytic debridement, granulation and epithelialization.

Exuderm RCD

Regulated colloidal dispersion (RCD)

Low residue formula enables Exuderm RCD to manage and absorb exudate while maintaining its integrity for longer wear.

Soft gel

Provides non-traumatic removal and simplifies wound cleansing, making dressing changes easier.

Protective, occlusive barrier

Facilitates autolytic debridement, granulation and epithelialization.

Exuderm LP

Low profile design

Ideal to protect against skin breakdown or to dress superficial wounds.

Low residue formula

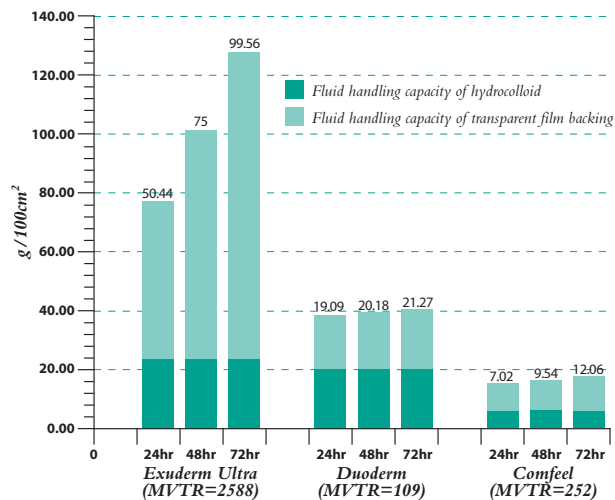
Enables Exuderm LP to manage and absorb light exudate while maintaining its integrity.

Protective, occlusive barrier

Facilitates autolytic debridement, granulation and epithelialization.

Exuderm Ultra Fluid Handling

Comparison of Fluid Handling Capacity



Independent study performed by: SMTL Laboratories, Bridgend, Wales

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds
- Leg ulcers
- Donor sites
- Wounds with light to moderate drainage (Exuderm Ultra is also indicated for heavily draining wounds.)
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Third degree burns

Change Frequency

- Every 2-7 days

Optifoam® Foam Dressing

Optifoam's fluid-handling capacity beats the market leaders.



Optifoam and Optifoam Non-Adhesive are hydropolymer dressings comprised of a thin foam backing over a hydrophilic foam pad.

The dressing's waterproof outer layer helps to maintain an optimally moist wound environment, prevent strike-through and aids in the prevention of bacterial contamination of the wound.

Optifoam and Optifoam Non-Adhesive's foam pads have micropores for low adherence to the wound surface, yet have a higher fluid-handling capacity than current market leaders. The foam island gently expands as it takes up exudate, keeping the dressing in contact with the wound surface for improved fluid handling.

Optifoam is considered a "smart" dressing because its Moisture Vapor Transmission Rate (MVTR) will adjust from 0 to 4500g/sqm per day, depending upon the fluid level in the wound.

A "smart" dressing

Optifoam's moisture vapor transmission rate will adjust depending on the fluid level in the wound.

Specially designed foam for low adherence

Micropores in the foam help minimize the chance of granulation tissue migrating into the foam.

High fluid handling

Both Optifoam and Optifoam Non-Adhesive can absorb a large amount of fluid when compared to other foam dressings.

Helps create ideal healing environment

With its high fluid handling capacity and protection against outside contaminants, Optifoam helps provide an ideal healing environment.

Waterproof outer layer protects

Optifoam's waterproof outer layer helps prevent strike-through and aids in the prevention of bacterial contamination of the wound.

Optifoam Ordering Information



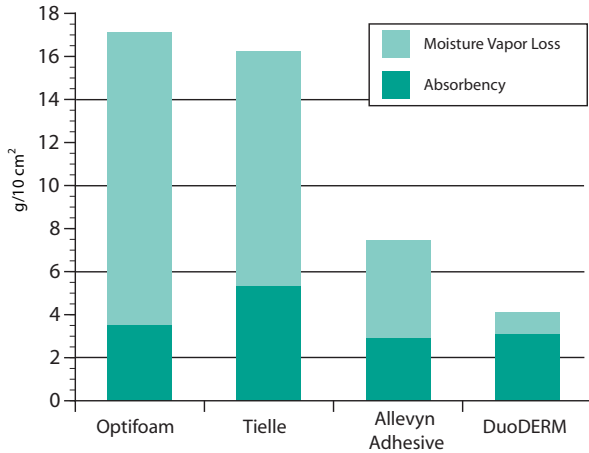
<u>Item No.</u>	<u>Description</u>	<u>HCPCS</u>	<u>Packaging</u>
Adhesive			
MSC1044	4" x 4", 2.5" x 2.5" pad	A6212	10/bx, 100/cs
MSC1066	6" x 6", 4.5" x 4.5" pad	A6213	10/bx, 100/cs
Non-Adhesive			
MSC1244	4" x 4"	A6209	10/bx, 100/cs
MSC1266	6" x 6"	A6210	10/bx, 100/cs

- Shallow No/Minimal Drainage Primary Dressing
- Deep Moderate/Heavy Drainage Secondary Dressing

Optifoam and Optifoam Non-Adhesive's total fluid handling capacity beats the market leaders!

Optifoam Fluid Handling

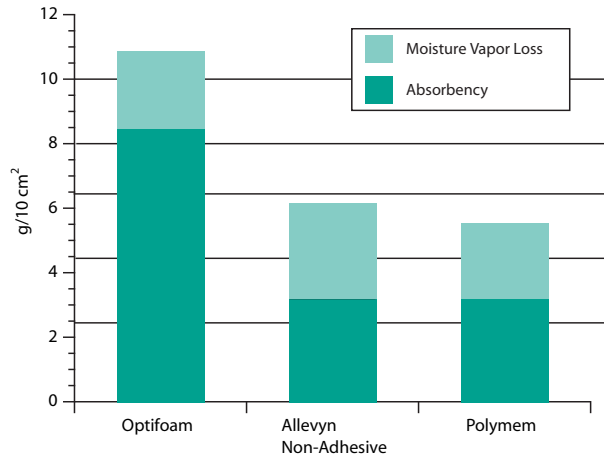
Fluid Handling Capacity = Moisture Vapor Loss + Absorbency



Independent study performed by SMTL Laboratories, Bridgend, Wales

Optifoam Non-Adhesive Fluid Handling

Fluid Handling Capacity = Moisture Vapor Loss + Absorbency



Independent study performed by SMTL Laboratories, Bridgend, Wales

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds
- Leg ulcers
- Donor sites
- Lacerations and abrasions
- Skin tears
- 1st and 2nd degree burns

Contraindications

- Third degree burns
- Lesions with active vasculitis

Change Frequency

- Up to seven days or until exudate is visible and nears the edge of the dressing.

Recommended Secondary Dressings

- Medfix Tape (for Optifoam Non-Adhesive)
- Elastic Net (for Optifoam Non-Adhesive)

Maxorb® Extra Alginate

Recommended Wound Conditions

- Shallow No/Minimal Drainage Primary Dressing
- Deep Moderate/Heavy Drainage Secondary Dressing

Maxorb provides easy one-piece removal and fast-acting absorption without lateral wicking.



Now 25% more absorbent

Maxorb Extra now absorbs 25% more than previous Maxorb styles, allowing for greater fluid handling.

Fluid will not wick laterally

Wound exudate mixes with Maxorb Extra to form a gel that will not wick out, reducing the potential for damage to peri-wound skin.

Superior gelling and fluid handling

The CMC fiber in Maxorb Extra improves the wicking and fluid handling as well as the wet strength.

Easy dressing changes

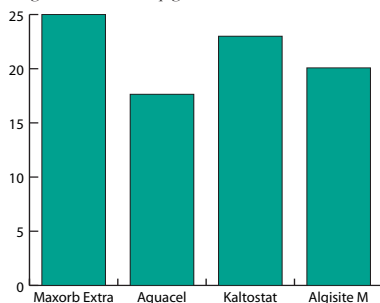
Simple, one-piece removal eases dressing changes.

Maxorb Extra's non-woven alginate and carboxymethylcellulose (CMC) fiber combination interacts with wound exudate to form a gel, providing for a moist healing environment. Compared to previous Maxorb dressings, Maxorb Extra has greater loft and fluid handling capacity — 25% more than before, and more than the other alginate dressings (see chart). The added presence of CMC in Maxorb Extra improves the gelling and fluid-

handling ability as well as adding improved wet strength. The pad will not wick exudate laterally, reducing the potential for delicate peri-wound tissue damage. The gelatinous pad may be easily lifted in one piece from the wound bed. Dressings are supplied in single pouches or lidded tray. The rope version's lidded tray keeps the fibers from compressing. As a result, fluid handling capacity is increased.

Maxorb Extra Absorbency Comparison

Alginate Absorbency g/100cm²



Independent study performed by SMTL Laboratories, Bridgeton, NJ

Maxorb Extra Ordering Information



Item No.	Description	HCPCS	Packaging
MSC7012	Rope, 12" (2 gm)	A6199	5/bx, 20/cs
MSC7022	Pad, 2" x 2"	A6196	10/bx, 100/cs
MSC7044	Pad, 4" x 4"	A6196	10/bx, 50/cs
MSC7048	Pad, 4" x 8"	A6197	5/bx, 50/cs
MSC7112	Post-Op, Flat Pad, 1" x 12"	A6196	5/bx, 20/cs

Indications

- Pressure ulcers (Stage II-IV)
- Partial and full thickness wounds
- Leg ulcers
- Diabetic ulcers
- Surgical wounds
- Donor sites
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Third degree burns
- For use as a surgical sponge
- Dry wounds

Change Frequency

- Dressing change is indicated by strike-through to secondary dressing or every 2-5 days or as directed by a health care professional.

Recommended Secondary Dressings

- Stratasorb Composite Dressing

Derma-Gel® Hydrogel Sheet

Recommended Wound Conditions

- Shallow No/Minimal Drainage Primary Dressing
- Deep Moderate/Heavy Drainage Secondary Dressing

Soft, flexible and cushioning, Derma-Gel absorbs up to five times its weight in exudate.



Helps create moist wound environment

Semi-occlusive hydrogel dressing helps create ideal healing environment.

Cushions and protects wound

Soft, flexible and cushioning cover over bony prominences or abraded skin.

Easy to apply and remove

Does not adhere to the wound bed or liquefy into the wound.

Reduces bioburden

Derma-Gel is bacteriostatic and fungistatic.

Highly absorbent

Absorbs up to five times its weight in exudate.

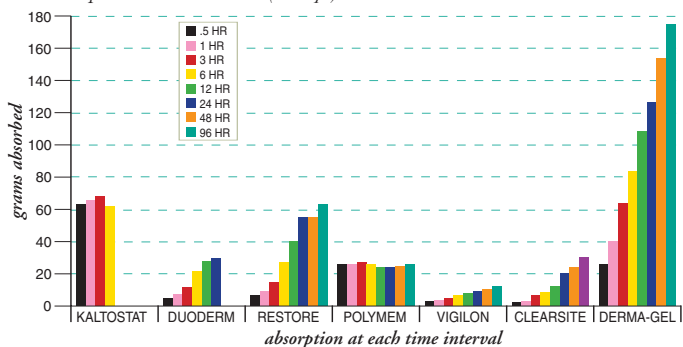
Derma-Gel's Effect on Bacteria

Identification	Derma-Gel	Clear Site	DuoDerm
<i>Pseudomonas aeruginosa</i>	2.890.01	9.460.01	9.430.33
<i>E. coli</i>	8.440.58 ^{††}	8.820.01	10.370.39
<i>S. aureus</i>	8.750.28 [†]	11.700.26	11.080.36
<i>Strep. pyogenes</i>	1.780.50	7.780.06	7.500.21
MRSA	4.180.89 ^{**}	9.900.96	10.390.38

Source: Can Occlusive Dressing Composition Influence Proliferation of Bacterial Wound Pathogens?
 Maria Oliveria-Gandia, DVM, Stephen C. Davis, BS, Patricia M. Mertz, BA, Wounds 1998;10 (1): 4-11

Derma-Gel Absorption Comparison

Absorption over 96 hours (4 days)



Independent study performed by NAmSA, Northwood, Ohio

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds
- Leg ulcers
- Surgical wounds
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Contraindicated for patients with known hypersensitivity to components of the gel.

Change Frequency

- Every 2-5 days or as necessary to maintain a moist wound bed.

Recommended Secondary Dressings

- Medfix Tape
- Suresite Film (for waterproofing)

Derma-Gel Ordering Information



Item No.	Description	HCPCS	Packaging
NON8000	4" x 4", Wafer	A6242	25/bx, 100/cs

Skintegrity® Hydrogel

Recommended Wound Conditions

- Shallow No/Minimal Drainage Primary Dressing
- Deep Moderate/Heavy Drainage Secondary Dressing

Clean, greaseless hydrogel ideal for helping maintain a moist wound environment.



Helps create moist wound environment

Clean, greaseless hydrogel helps keep wound bed hydrated.

Balanced formulation

Special formulation with added aloe balances viscosity and hydration.

Easy Irrigation

Greaseless formulation irrigates easily from the wound bed.

Skintegrity is a clean, greaseless hydrogel used for the maintenance of a moist wound environment. Special glycerin formulation, with added aloe, balances viscosity and hydration. Greaseless formulation irrigates easily from the wound bed.

Cytotoxicity Test For Skintegrity Hydrogel

Using Murine L929 Embryo Fibroblasts Agar Overlay Neutral Red Assay

Test Material	IDRCC #278 (Wound Gel)	Negative Control	Positive Control
Concentration %	100%	N/A	100%
Exposure (Time)	21 Hours	21 Hours	21 Hours
Zone of Inhibition (mm)	0	0	0
Comments/Observations (Grade and Reactivity)	0 / None	0 / None	Entire disk was clear cells dead

Independent study performed by Thomas J. Stephens & Associates, Inc.

Indications

- Pressure ulcers (Stage II-IV)
- Partial and full thickness wounds
- Leg ulcers
- Surgical wounds
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Contraindicated for patients with known hypersensitivity to components of the gel.
- Heavily exuding wounds.

Change Frequency

- Every 72 hours or as necessary to maintain a moist wound bed.

Recommended Secondary Dressings

- Stratasorb Composite Dressing
- Bordered Gauze

Skintegrity Hydrogel Ordering Information



Item No.	Description	HCPCS	Packaging
MSC6102	Bellows Bottle, 1 oz.	A6248	30/cs
MSC6104	Tube, 4 oz.	A6248	12/cs

Skintegrity® Hydrogel Impregnated Gauze

Recommended Wound Conditions		
<input type="radio"/> Shallow	<input checked="" type="radio"/> No/Minimal Drainage	<input checked="" type="radio"/> Primary Dressing
<input checked="" type="radio"/> Deep	<input type="radio"/> Moderate/Heavy Drainage	<input type="radio"/> Secondary Dressing

Hydrogel impregnated gauze helps pack deep wounds and maintain a moist wound environment.



Excellent for deep wounds

Impregnated gauze unfolds and easily conforms to deep or tunneling wounds.

Helps create moist wound environment

Clean, greaseless hydrogel helps keep wound bed hydrated.

Balanced formulation

Special hydrogel formulation with added aloe balances viscosity and hydration.

Easy Irrigation

Greaseless formulation irrigates easily from the wound bed.

Skintegrity is a clean, greaseless hydrogel used for the maintenance of a moist wound environment. Hydrogel is compression saturated onto gauze sponges, ensuring thorough coverage. Special formulation, with added aloe, balances viscosity and hydration. Greaseless formulation irrigates easily from the wound bed.

Skintegrity Hydrogel Impregnated Gauze		latexfree PRODUCT	
Ordering Information			
Item No.	Description	HCPCS	Packaging
MSC6144	4" x 4", 12-ply	A6231	2/pk, 30 pk/cs
MSC6022	2" x 2", 12-ply	pending	1/pk, 50/cs
MSC6044	4" x 4", 12-ply	pending	1/pk, 30/cs

Indications

- Pressure ulcers (Stage II-IV)
- Partial and full thickness wounds
- Leg ulcers
- Surgical wounds
- Lacerations and abrasions
- 1st and 2nd degree burns

Contraindications

- Contraindicated for patients with known hypersensitivity to components of the gel.

Change Frequency

- Every 72 hours or as necessary to maintain a moist wound bed.

Recommended Secondary Dressings

- Bordered Gauze
- Stratasorb Composite Dressing

Suresite® Transparent Film

A variety of formats makes Suresite an ideal choice for various applications of transparent film



The Suresite family of transparent films can be used to protect I.V. sites, promote wound healing by providing a moist environment, help prevent skin breakdown and protect surgical incisions.

Using a latex-free adhesive, Suresite is gentle on the skin, but stays firmly in place for extended periods of time.

Waterproof, conformable and impervious to bacteria, Suresite is the ideal choice for the patient and the clinician.

Traditional moisture vapor transmission rate (MVTR)

Suresite's MVTR is equivalent to Tegaderm® and Opsite® for optimum fluid management and to help provide a moist wound healing environment.

Conformable

Suresite is conformable to difficult-to-dress areas.

Microporous technology

Microporous technology provides protection against pathogens while ensuring breathability.

Permits continuous observation

Provides a clear view for monitoring wound conditions.

Variety of formats

Various delivery styles available depending on application

Suresite Ordering Information



<u>Item No.</u>	<u>Description</u>	<u>HCPCS</u>	<u>Packaging</u>
MSC2002	Suresite I.V., 2" x 3"	A6257	100/bx
MSC2104	Suresite (2 Handle), 4" x 5"	A6258	50/bx
MSC2204	Suresite Matrix, 4" x 4½"	A6258	50/bx
MSC2206	Suresite Matrix, 6" x 8"	A6259	10/bx, 10 bx/cs
MSC2302	Suresite Window, 2¾" x 2¾"	A6257	100/bx
MSC2304	Suresite Window, 4" x 4½"	A6258	50/bx



Suresite (2 Handle)

The two-handle design includes patient information on each side for easier marking.



Suresite I.V.

Convenient 2" x 3" size with one tape handle and label.



Suresite Window

Features a "window frame" to allow for quick and easy one-handed positioning of the dressing.



Suresite Matrix

A unique wound measurement device allows simple but accurate assessments of the healing process. The outline of the wound can be traced on the dot-matrix carrier sheet, removed and transferred to the patient's records.

MVTR Data for Suresite

Transparent Film

MVTR

Suresite

1,209 g/M sq/24 hours

*"Inverted Juice Cup" test method ASTM 1249
Independent study performed by Mylan Technologies, Inc.*

Indications

- Pressure ulcers (Stage I-II); (as secondary dressing only for Stage III-IV)
- Partial thickness wounds (as secondary dressing only for full thickness wounds)
- Peripheral and central I.V. lines
- Skin tears
- Lacerations and abrasions
- To help prevent skin breakdown caused by shear and friction

Contraindications

- Contraindicated as a primary dressing on moderately to heavily draining wounds.

Change Frequency

- Dressing can be worn up to seven days depending upon the amount of drainage or as frequently as the primary dressing indicates.

Medfix™ and Medfix™ EZ Dressing Retention Sheet

Recommended Wound Conditions

- Shallow No/Minimal Drainage Primary Dressing
 Deep Moderate/Heavy Drainage Secondary Dressing

Low-sensitivity adhesive and easy-peel back make Medfix easy to use.



Low sensitivity adhesive

Medfix and Medfix EZ use a low sensitivity adhesive for gentle but secure adhesion.

Medfix has a printed s-curve release liner

Printed release liner makes it easy to measure the desired length. S-curve release liner removes cleanly.

Medfix EZ is linerless

A linerless roll means faster application. No extra step in removing the paper release liner.

Medfix EZ is perforated

Medfix EZ is perforated every two inches for easy tearing when applying.

Water resistant

Medfix is water resistant and acts as an excellent secondary dressing for gauze, foams, gels, etc.

Medfix Ordering Information



Item No.	Description	HCPCS	Packaging
Medfix			
MSC4002	Roll, 2" x 11 yds	A4452	1 roll/bx
MSC4004	Roll, 4" x 11 yds	A4452	1 roll/bx
MSC4006	Roll, 6" x 11 yds	A4452	1 roll/bx
Medfix EZ			
MSC4102	Roll, 2" x 11 yds	A4452	12 ea/bx
MSC4104	Roll, 4" x 11 yds	A4452	12 ea/bx
MSC4106	Roll, 6" x 11 yds	A4452	12 ea/bx
MSC4122	Roll, 2" x 2 yds	A4452	12 ea/bx
MSC4124	Roll, 4" x 2 yds	A4452	12 ea/bx
MSC4126	Roll, 6" x 2 yds	A4452	12 ea/bx

Indications

- To secure primary dressings such as gauze, foams, and gel wafers.
- To secure gastrostomy tubes and other feeding tubes.

Contraindications

- Contraindicated as a primary dressing.

Change Frequency

- Change dressing at least every seven days or as required by primary dressing.

Stratasorb® Composite Dressing

Recommended Wound Conditions

- Shallow ● No/Minimal Drainage ● Primary Dressing
- Deep ● Moderate/Heavy Drainage ● Secondary Dressing

4-layer island dressings protects, absorbs and helps keep the wound moist.



Stratasorb is a 4-layer composite island dressing that protects, absorbs and keeps the wound moist. Comprised of a non-adherent wound contact layer, absorbent soaker, non-woven adhesive border and waterproof, bacteria-resistant backing.

Deluxe soaker pad

Heavy duty soaker pad handles high levels of exudate.

Non-woven adhesive border

Conformable, non-woven fabric gives secure adhesion, even on difficult-to-dress areas.

Waterproof backing

Transparent film top layer keeps contaminants out, permits bathing and helps protect bed linens and clothing.

Ideal for incision sites

Rectangular-shaped Stratasorb is designed for post-op applications.

Stratasorb Ordering Information



Item No.	Description	HCPCS	Packaging
MSC3044	4" x 4", 2½" x 2" pad	A6203	10/bx, 100/cs
MSC3066	6" x 6", 4" x 4" pad	A6203	10/bx, 100/cs
MSC3068	6" x 7½", 4" x 6" pad	A6204	10/bx, 100/cs
MSC30410	4" x 10", 2" x 8" pad	A6203	10/bx, 100/cs
MSC30414	4" x 14", 2" x 12" pad	A6204	10/bx, 100/cs

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds

Contraindications

- Third degree burns
- Patients who exhibit sensitivity to components of the dressings.

Change Frequency

- Change the dressing as indicated by the amount of exudate or as frequently as the primary dressing indicates.

Bordered Gauze

Recommended Wound Conditions

- Shallow ● No/Minimal Drainage ● Primary Dressing
- Deep ● Moderate/Heavy Drainage ● Secondary Dressing

Ideal for daily dressing changes.



Medline Bordered Gauze is an absorbent island dressing with a protective, air-permeable adhesive backing and non-adherent wound contact layer. Ideal for daily dressing changes.

Deluxe soaker pad

Heavy duty soaker pad handles high levels of exudate.

Non-woven adhesive border

Conformable, non-woven fabric gives secure adhesion, even on difficult-to-dress areas.

Ideal for incision sites

Rectangular-shaped Bordered Gauze is designed for post-op applications

Bordered Gauze Ordering Information



<u>Item No.</u>	<u>Description</u>	<u>HCPCS</u>	<u>Packaging</u>
Sterile			
MSC3222	2" x 2", 1" x 1" pad	A6219	15/bx, 150/cs
MSC3244	4" x 4", 2½" x 2½" pad	A6219	15/bx, 150/cs
MSC3245	4" x 5", 2½" x 2½" pad	pending	15/bx, 150/cs
MSC3248	4" x 8", 2" x 6" pad	pending	15/bx, 150/cs
MSC3266	6" x 6", 4" x 4" pad	A6219	15/bx, 150/cs
MSC32410	4" x 10", 2" x 8" pad	A6219	15/bx, 150/cs
MSC32414	4" x 14", 2" x 12" pad	A6220	15/bx, 150/cs

Indications

- Pressure ulcers (Stage I-IV)
- Partial and full thickness wounds

Contraindications

- None

Change Frequency

- Change the dressing as indicated by the amount of exudate or as frequently as the primary dressing indicates.

Skintegrity® Wound Cleanser

Delivers a gentle, yet thorough cleansing.



Skintegrity Wound Cleanser facilitates removal of debris and proteinaceous material from the wound. Non-cytotoxic, Skintegrity features a non-ionic surfactant that offers gentle yet thorough cleansing action. Sprayer delivers a PSI level of 8.6 at a 3" spraying distance which falls within AHCPR guidelines of 4 to 15 PSI.

Cytotoxicity Test For Skintegrity Wound Cleanser

Using Murine L929 Embryo Fibroblasts Agar Overlay Neutral Red Assay

Test Material	Skintegrity Wound Cleanser	Untreated Filter Pad	Sodium Lauryl Sulfate
Concentration %	100%	N/A	100%
Exposure (Time)	19 Hours	19 rs	19 rs
Average Reactivity Score	0	0	2.67
Reactivity	non-reactive	non-reactive	mild to moderate

Independent study performed by Thomas J. Stephens & Associates, Inc.

Easy cleansing

Non-ionic surfactant facilitates removal of debris and proteinaceous material from wound.

Non-cytotoxic

Nothing in Skintegrity Wound Cleanser will harm the wound bed.

Within AHCPR guidelines

Sprayer delivers a PSI level of 8.6 at a 3" spraying distance which falls within AHCPR guidelines of 4 to 15 PSI.

Adjustable trigger

Trigger sprayer permits either spray or stream delivery.

Indications

To clean a wide variety of wounds including:

- Stage II-IV pressure ulcers
- Partial and full thickness wounds
- Infected and non-infected wounds

Contraindications

- Any known sensitivity to Skintegrity Wound Cleanser's ingredients.

Change Frequency

- With every dressing change.

Skintegrity Wound Cleanser Ordering Information



Item No.	Description	Packaging
MSC6008	8 oz. Spray Bottle	6/cs
MSC6016	16 oz. Spray Bottle	6/cs

FourFlex 4-Layer Compression Bandage System

Effective compression treatment for venous stasis disease.



Improved version! Layers 1 and 2 now conform better to body contours.

Compression is the cornerstone of venous ulcer treatment. Effective graduated compression is recognized as the single most important factor in treating venous leg ulcers.

FourFlex is a four-layer compression bandaging system used to manage venous leg ulcers and related conditions.

This four-layer bandaging system provides approximately 30–40 mm/Hg pressure at the ankle, decreasing to 12–17 mm/Hg at the calf¹. Safe levels of compression are built up gradually through the use of layers. Plus, bony prominences are padded for protection.

FourFlex's weekly dressing changes greatly reduce nursing time required for the treatment of leg ulcers. In addition, the packaged components take the guesswork out of gathering appropriate bandages.

FourFlex is best used on ankle circumferences greater than 18 cm (7¼"). If necessary, the ankle can be padded to achieve this circumference.

¹ Independent testing completed by S.M.T.L., Bridgend, Wales

Simple, effective compression

Four layers of bandages work together to provide safe and effective compression.

Extended wear time

FourFlex provides compression for up to seven days.

Offers protection

The four layers provide padding for bony prominences.

Absorbs fluid

Layers 1 and 2 also absorb wound exudate.

Reduces nursing time

Weekly dressing changes greatly reduce time required for dressing changes.

Efficient packaging

Packaged components take the guesswork out of gathering appropriate bandages. Bag is also for disposal.

Indications

- Treatment of venous stasis disease

Contraindications

- Patients with an Ankle Brachial Pressure Index (ABI) of less than 0.8. An ABI of less than 0.8 may mean that the patient has arterial insufficiency or the leg ulcer is of mixed etiology.

Change Frequency

- Every seven days or as wound drainage requires.

FourFlex Ordering Information

Description	Packaging	Item No.
MSC4400	FourFlex Kit	8 kits/cs
Components include:		HCPCS Code
Padding Bandage	4" x 3.8 yd. (unstretched)	A6441
Light Conforming Bandage	4½" x 4.9 yd. (unstretched)	A6449
Compression Bandage	4" x 10 yd. (stretched)	A6452
Cohesive Bandage	4" x 6.5 yd. (stretched)	A6454
3 Pieces of Tape		



Medigrip Elasticated Tubular Bandage

Provides even support and pressure to reduce edema and assist in venous returns.



Medigrip elasticated support bandage provides support following soft tissue injuries, dislocation and sprains. Its knitted fabric construction with interwoven elastomer ensures excellent support, enabling it to be used where radial support is required.

Practical, easy and quick to apply, Medigrip is self-retaining and may be removed and reapplied without degrading the bandage's support.

Medigrip's versatility also makes it suitable for a wide range of clinical uses including the treatment of hypertrophic scarring, support for amputation stumps, reduction of edema, assisting venous return and prevention of varicose veins.

Provides excellent support

Knitted fabric construction with interwoven elastomer ensures superior radial support.

Easy to apply and reapply

Reapplication will not degrade Medigrip's support capabilities. Remains in place without tying or tapes.

Wide range of applications

Reduces edema, swelling and assists venous return. Also provides support for amputation stumps and soft tissue injuries.

Compression Testing of Bandages

Based on principles contained in BS 6612¹

Test Material	Test	Limb Circumference (cm)	Pressure (mm/Hg)
Medigrip	1	17.2	7.2
Tubigrip	1	17.2	5.8
Medigrip	2	18.7	7.0
Tubigrip	2	18.7	6.1

Summary:

Although the statistical analysis indicated that the pressures produced by the two products are different, this difference is unlikely to prove significant in the clinical situation.

Independent study performed by SMTL, Bridgend, Wales

¹ British Standards Institution, "Graduated Compression Hosiery", BS6612, (1985, 1993)

Medigrip Ordering Information

Item No.	Description	HCPCS	Packaging
Each roll is 11 yards (10 m) in length			
MSC9500	Size A, 1¾" wide (4.5 cm) for infant feet and arms	K0620	1 rl/bx
MSC9501	Size B, 2½" wide (6.25 cm) for small hands and limbs	K0620	1 rl/bx
MSC9502	Size C, 2¾" wide (6.75 cm) for adult hands, arms or legs	K0620	1 rl/bx
MSC9503	Size D, 3" wide (7.5 cm) for large arms or legs	K0620	1 rl/bx
MSC9504	Size E, 3½" wide (8.75 cm) for legs or small thighs	K0620	1 rl/bx
MSC9505	Size F, 4" wide (10 cm) for large knees or thighs	K0620	1 rl/bx
MSC9506	Size G, 4¾" wide (12 cm) for large thighs	K0620	1 rl/bx

Indications

- Edema
- Treatment of venous stasis disease
- Dislocations
- Sprains
- Hypertrophic scarring

Contraindications

- None.

Change Frequency

- Every seven days or as wound drainage requires.

Sureprep® Protective Wipes

Helps create a barrier on peri-wound skin to prevent maceration.



Sureprep creates a barrier film on peri-wound skin. This vapor-permeable film helps protect the skin from maceration and stripping caused by adhesives.

Indications

- May be used on periwound skin to protect from adhesive and/or moisture damage.
- Peristomal skin

Contraindications

- Contraindicated for direct application to wound bed or to denuded or macerated skin.

Change Frequency

- With every dressing change.

Sureprep Ordering Information



<u>Item No.</u>	<u>Description</u>	<u>Packaging</u>
MSC1500	Skin Protective Wipe	50/bx, 1000/cs

Adhesive Tape Remover Pads

Use to ease removal of adhesive tape and adhesive residue. Saturated with perchlorethylene, aliphatic naphtas and isopropyl stearate. Textured, 1¼" x 1½", folded.

Adhesive Tape Remover Ordering Information



<u>Item No.</u>	<u>Description</u>	<u>Packaging</u>
MDS090855	Adhesive Remover Pad	100/bx, 1000/cs

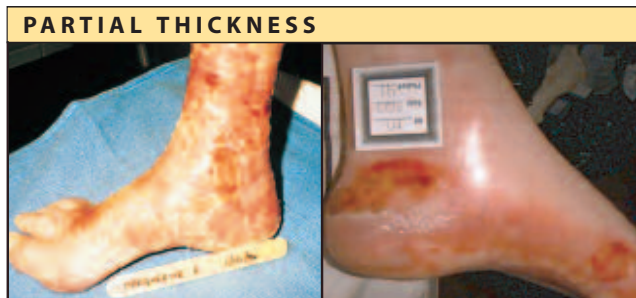
Classification of Tissue Destruction

Ulcers *not* caused by pressure such as skin tears, donor sites, vascular ulcers, surgical wounds and burns are described as partial or full thickness to indicate the depth of tissue destruction.

- **Partial Thickness (like Stage II)**
- **Full Thickness (like Stage III or IV)**

Ulcers caused by pressure are staged. This is a method of classifying pressure ulcers, describing the degree of tissue damage observed.

(Source NPUAP, 1999)



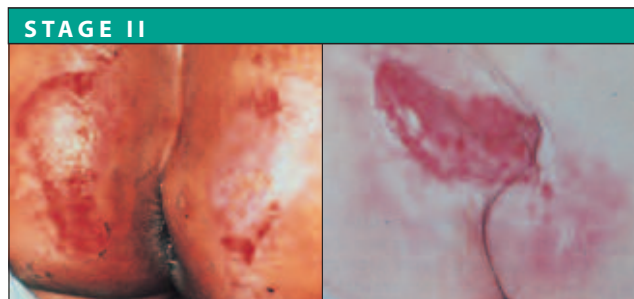
Ulcers not caused by pressure are referred to as partial thickness when tissue destruction is through the epidermis and into but not through the dermis.



Ulcers not caused by pressure are referred to as full thickness when tissue destruction is through the epidermis and dermis and extends into the subcutaneous or deeper structures.



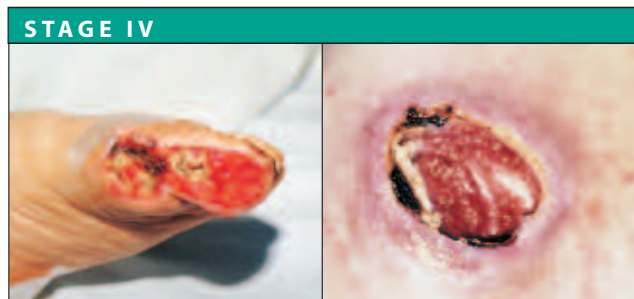
Observable pressure-related alteration of intact skin whose indicators are compared to an adjacent or opposite area on the body may include changes in one or more of the following: skin temperature (warmth or coolness), tissue consistency (firm or boggy feel), and or sensation (pain, itching). The ulcer appears as a defined area of persistent redness in lightly pigmented skin tones, whereas in darker skin tones, the ulcer may appear with persistent red, blue or purple hues.



Partial thickness skin loss involving epidermis, dermis or both. The ulcer is superficial and presents clinically as an abrasion, blister or shallow crater.



Full thickness skin loss involving damage to, or necrosis of, subcutaneous tissue that may extend down to, but not through, underlying fascia. The ulcer presents clinically as a deep crater with or without undermining of adjacent tissue.



Full thickness skin loss with extensive destruction, tissue necrosis or damage to muscle, bones, or supporting structures (e.g. tendon, joint capsules). Undermining and sinus tracts also may be associated with Stage IV pressure ulcers.

Wound Bed Preparation

Choose the dressing for the current wound assessment. Your choice may change as wound changes.

STEP 1 Does the wound need debriding?

DEBRIDE

TenderWet Active Polyacrylate Gel Pad

- For any level of exudate
- If wound has minimal depth
- If debridement is primary goal

TenderWet Active Cavity Polyacrylate Gel Pad

- For any level of exudate
- If wound has sizable depth
- If debridement is primary goal
- If secondary goal is filling "dead space"

STEP 2 Does the wound show signs of bioburden overgrowth?

REDUCE BIOBURDEN

Arglaes Film

- If exudate is none to light
- If wound has minimal depth
- If primary goal is coverage/protection of site with bioburden reduction
- Ideal for dry post-op or I.V. sites

Arglaes Powder

- If exudate is moderate to heavy
- If wound has sizable depth with tunneling, undermining or irregular shape
- If primary goal is fluid handling with bioburden reduction

Arglaes Island

- If exudate is light to moderate
- If wound has minimal depth
- If primary goal is coverage/protection of site, bioburden reduction and some fluid handling

SilvaSorb Sheet

- If exudate is light to heavy
- If wound has minimal depth
- If primary goal is exudate absorption with bioburden reduction

SilvaSorb Cavity

- If exudate is moderate to heavy
- If wound has sizable depth with tunneling, undermining or irregular shape
- If primary goal is exudate absorption with bioburden reduction

SilvaSorb Wound Gel

- If exudate is none to light
- If primary goal is wound hydration with bioburden reduction

Maxorb Extra Ag

- If exudate is moderate to heavy
- If primary goal is absorption with bioburden reduction

STEP 3 Address moisture management needs of the wound

HYDRATE

Exuderm Hydrocolloid

- If exudate is light to moderate
- If occlusion is important, i.e., sacral wound on incontinent patient
- If longer dressing wear time is preferred

Suresite Transparent Film

- If exudate is small or none
- If wound is superficial, such as skin tears

Derma-Gel Hydrogel Sheet

- If exudate is light to moderate
- If semi-occlusion is preferred for Stage IV or infected wounds
- If cushioning is desired
- If tapeless edges are preferred for sensitive skin or "peeking" at the wound

Skintegrity Amorphous Hydrogel

- If exudate is small or none
- If moisture donation is primary goal

ABSORB

Maxorb Extra CMC/Alginate

- If exudate is moderate to heavy
- If wound bed varies in depth requiring some flexibility

Optifoam Foam Pad

- If exudate is moderate to heavy
- If cushioning is desired

Exuderm Hydrocolloid

- If exudate is light to moderate
- If occlusiveness is preferred, i.e., sacral wound on incontinent patient

Derma-Gel Hydrogel Pad

- If exudate is light to moderate
- If semi-occlusion is preferred for Stage IV or infected wounds
- If cushioning is desired
- If tapeless edges are preferred for sensitive skin or "peeking" at the wound

HYDRATE & FILL

Skintegrity Amorphous Hydrogel

- If exudate is small or none
- If wound has minimal depth
- If hydration is primary goal

Skintegrity Hydrogel Impregnated Gauze

- If exudate is small or none
- If wound has sizable depth
- If primary goal is filling "dead space" while lending moisture

ABSORB & FILL

Maxorb Extra CMC/Alginate

- If exudate is moderate to heavy
- If wound has minimal depth, use the pad
- If wound has sizable depth with tunneling, undermining or irregular shape, use the rope
- If primary goal is exudate absorption

Product Selection Guide Based on Fluid Handling

DRESSING	— DRAINAGE —			
	Dry/No Drainage	Moist/Minimal	Moderate	Heavy
Suresite Transparent Film	AS A SECONDARY DRESSING			
Exuderm Hydrocolloid	THIN		STANDARD	
	INTELLIGENT (EXTENDED WEAR TIME)			
Skintegrity Amorphous Hydrogel				
Derma-Gel Hydrogel Sheet				
Maxorb Extra Alginate Maxorb Extra Alginate Ag				
Optifoam Foam				
Stratasorb Composite	AS A SECONDARY DRESSING			
Bordered Gauze	AS A SECONDARY DRESSING			
Arglaes Antimicrobial Silver Dressing	ARGLAES FILM		ARGLAES ISLAND	
	ARGLAES POWDER			
SilvaSorb Antimicrobial Silver Dressing	SILVASORB			
	SILVASORB CAVITY			
	SILVASORB HYDROGEL			
Tenderwet Active Polyacrylate Gel Pad	TENDERWET ACTIVE			

Compass provides clinical direction and education for everyone on your wound and skin care team.

Compass is an education system that offers training for all levels of your staff.

Compass consists of several components that help deliver an extensive skin and wound care education program to everyone from the RN to the physician to the CNA.

Best of all, the training doesn't stop after the initial box. With a minimal product commitment, you will continue to receive quarterly updates.



Benefits of Compass

- Helps educate entire staff.
- Simple but comprehensive skin and wound care protocols with supporting documentation.
- Increased staff understanding and compliance.
- Cost-savings through standardization.
- Helps manage the reduction of facility-acquired wounds.
- Standards of care and practice guidelines are updated, written and followed.
- Improved patient care.
- Ongoing training and education of staff.



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